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**Preclinical development of AAV vector-mediated in vivo hepatic reprogramming of myofibroblasts as a therapy for liver fibrosis**

**Grant Award Details**

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Preclinical development of AAV vector-mediated in vivo hepatic reprogramming of myofibroblasts as a therapy for liver fibrosis

**Grant Type:** Quest - Discovery Stage Research Projects

**Grant Number:** DISC2-10088

**Project Objective:** Preclinical development of AAV vector-mediated in vivo hepatic reprogramming of myofibroblasts as a therapy for liver fibrosis.

**Investigator:**

<b>Name:</b>	Holger Willenbring
<b>Institution:</b>	University of California, San Francisco
<b>Type:</b>	PI

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**Disease Focus:** Liver Disease

**Award Value:** \$1,638,389

**Status:** Active

**Grant Application Details**

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**Application Title:** Preclinical development of AAV vector-mediated in vivo hepatic reprogramming of myofibroblasts as a therapy for liver fibrosis

**Public Abstract:****Research Objective**

An intravenously injectable virus that converts the scar cells responsible for liver cirrhosis into the cells that provide most of the liver's function, thereby preventing or reversing liver failure.

**Impact**

The proposed research will develop a new therapy for liver cirrhosis, which can be cured by liver transplantation, but there are not enough donor organs for all patients in need.

**Major Proposed Activities**

- Construction of a single AAV vector expressing the human transcription factors FOXA3, HNF1A and HNF4A effective in hepatic reprogramming of human myofibroblasts.
- Identification of chimeric AAV capsids that transduce human myofibroblasts in vivo with high efficiency and specificity.
- Identification of human myofibroblast-targeted chimeric AAV capsids that are not neutralized by human antibodies against naturally occurring AAV capsids.
- Demonstration of therapeutic efficacy and principal safety of in vivo hepatic reprogramming of human myofibroblasts.

**Statement of Benefit to California:**

California has one of the longest wait times for a donor liver in the US. Therefore, many Californians with liver cirrhosis have to be hospitalized or die while waiting for a transplant. By developing a broadly applicable new therapy for liver cirrhosis, the proposed research will improve the outcomes of patients with liver cirrhosis and reduce the financial burden on California's medical system.

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